Placating a Nation

By Craig Stellpflug

The Atrocity of Medical Treatment without Informed Consent

Placate: to lessen the anger or agitation of…

There is a population of people in the world today that are subject to involuntary medical treatment similar to that of the former Nazi regime and the Soviet Gulags. Masses of targeted population were then and are again today being medicated without informed consent. This medical treatment then and now is one that is slowing their reproduction rates, making them more docile, making them more dependant on their government and less able to organize rebellion. This involuntary and un-informed treatment caused untold suffering and death then but pales by comparison to the toll of suffering and death today. This action was condemned and prosecuted in the world arena then but is slipping by virtually unnoticed by freedom loving people today.

A potent neurological agent has been purposefully placed in the drinking water of more than one country now for many decades. In Germany, circa WWII, the alleged reason for mass-medicating water with this chemical was to sterilize humans and force the people in their concentration camps into calm submission.[1] The introduction of this medication into the drinking water was to control the population and squelch the ability to organize rebellion among the citizens of certain areas and ethnic groups along with the prisoners in the war camps. This medication is the same basic chemical being used today.

What is this dangerous chemical these populations are subject to by benignly drinking and using community water? It is called hexafluorosilicic acid, floridine, sodium monofluoride, disodium difluoride, natrium fluoride, florocid or more commonly known as sodium fluoride.

In other , whole countries are being placated, sterilized and controlled in mass by an insidious drug introduced into their water stream, dentifrices and food sources. New heights of attention deficit and mental deterioration and intellectual impairment are achieved daily in these societies along with an escalating complexity of illness and even genetic defects all related to sodium fluoride. Hitler's plan to "take over the world" included medicating the water supply with sodium fluoride!

This potent chemical is a prime ingredient in Prozac® and in Sarin Nerve Gas. It is a prime ingredient in anesthetics and in psychotropic and hypnotic drugs. It is also the prime ingredient in rat and roach poison and classified medically as a protoplasmic poison. It has been considered and investigated as tumorigenic, mutagenic, and a reproductive effector.

> *"Repeated doses of infinitesimal amounts of fluoride will in time reduce an individual's power to resist domination, by slowly poisoning and narcotizing a certain area of the brain, thus making him submissive to the will of those who wish to govern him…any person who drinks artificially fluorinated water for a period of one year or more will never again be the same person mentally or physically."* Signed: CHARLES E. PERKINS, Chemist.
> http://www.sonic.net/kryptox/history/perkins2.htm

Because fluoride is an enzyme inhibitor it puts every cell in your body at risk. It's been said that man does not die, he kills himself. The dumbing down of America is real and sodium fluoride medication plays a role by treating the rights of free citizens to choose or refuse medical treatment as if it no longer exists! The involuntary introduction of mass medication for experimentation on humans is insane at best and going on wholesale in America and other freedom loving countries today through fluoridation of our water and food supply.

While it is true that our teeth and bones require fluoride to be healthy and strong, what we need is calcium fluorophosphate and not sodium fluoride. This form of calcium fluoride is important for muscle tone, tissue, tendon and capillary strength and bonding calcium from the saliva to the teeth. Homeopathic remedies of Calcium fluoride work for symptoms of hardening of the arteries, hard tumors, hemorrhoids, varicose veins and emotional problems. Calcium fluoride is found naturally in water and some food sources and will not mottle the teeth as other forms of fluoride will.

Sodium fluoride on the other hand is an acute poison that in excessive amounts will shorten the life span, mottle the teeth and make the bones brittle as well as promote various cancers.[2] This form of fluoride imitates the hydrogen ion which easily crosses the blood-brain barrier and allows fluoride access to brain tissues. Studies and independent scientific evidence have shown that sodium fluoride in small amounts in the brain causes symptoms of mental disturbances and has the psychological effect of making humans docile and subservient. Sodium fluoride also has a strong affinity for bonding with aluminum which is a causative factor in Alzheimer's disease.

Facts about sodium fluoride

Sodium fluoride is principally a waste byproduct of the nuclear and aluminum industry and is sold to our municipal water supplies. Sodium fluoride is found in our community water supply, toothpaste, mouthwash, dental treatments, juice, soft drinks, canned food, commercially processed fruit and vegetables, and in coated cooking utensils.

Adults can absorb up to .5 mg a day of sodium fluoride using a "ribbon" of toothpaste for normal brushing. Children can absorb even more than that if they are swallowing the paste. Half a tube of toothpaste is toxic enough to kill a small child. It is for this reason that a small warning label is required on toothpaste packaging.

Ingested quantities of sodium fluoride as small as 0.04 mg a day have been proven to cause adverse health effects. Lifetime ingestion and retention of 2mg of fluoride a day can produce crippling skeletal fluorosis.[3] and yet in "optimally fluoridated" areas of our country our current intake is estimated to be between 5 and 7 mg a day! Up to half of each day's intake of sodium fluoride is retained in the body and the other half is eliminated by normal kidney function.[4]

Known effects of sodium fluoride

> *"Regarding fluoridation, the EPA should act immediately to protect the public, not just on the cancer data, but on the evidence of bone fractures, arthritis, mutagenicity and other effects"* William Marcus, Ph. D., senior EPA toxicologist, Covert Action, Fall 1992, p. 66
>
> *"Water fluoridation is the greatest case of scientific fraud of this century... if not of all time."* Dr Robert Carton, former President of the Union of Government Scientists at the US Environmental Protection Agency.

The American Dental Association is now advising to NOT give fluoridated water to infants as it causes brain damage and puts them at a high risk of developing dental fluorosis.

According to the Leningrad Medical Institute a "safe" concentration of 1.0 ppm can cause derangements in blood sugar balance.

Fluoride exposure disrupts the synthesis of collagen and leads to the breakdown of collagen in bone, tendon, muscle, skin, cartilage, lungs, kidney and trachea.[5]

Fluoride depletes the energy reserves and the ability of white blood cells to effectively eliminate foreign agents by phagocytosis. (Even micro amounts of fluoride may seriously depress the ability of white blood cells to destroy pathogenic agents.)[6]

Fluoride confuses the immune system and causes it to attack the body's own tissues[7] and inhibits antibody formation.[8]

Fluoride causes cancer.[9]

Fluoride causes premature aging.[10]

Fluoride depresses thyroid activity.[11]

Fluoride ingested from mouth rinses and dentifrices is extremely hazardous to the development, health and life span of children.[12]

High fluoride concentrations in drinking water is associated with decreased birth rates .[13]

The general consensus that fluoridation is beneficial is generally beyond question and this idea prevails in our society even after decades of negative results and studies. When sodium fluoride was first introduced into our water supplies it was accepted upon the premise of “prescience” along with a lack of contraindications and data.

Some community water supplies us an even cheaper version of fluoride called silicofluorides. According to research presented to the 17th International Neurotoxicology Conference[14] these silicofluorides are associated with an increase in children's blood lead levels.[15] In research dated September 1999, published in the International Journal of Environmental Studies, Masters and Coplan studied lead screening data from 280,000 Massachusetts children. They found that average blood lead levels are significantly higher in children living in communities whose water is treated with silicofluorides. Data from the Third National Health and Nutrition Evaluation Survey (NHANES III) and a survey of over 120,000 children in New York towns (population 15,000 to 75,000) corroborate this effect.

Fluoride’s failure as a dentifrice

A New Zealand study in 1990 conducted by Dr. John Colquhoun on 60,000 school children found no difference in the occurrence of tooth decay between fluoridated and non-fluoridated areas.[14] He also found a substantial increase in dental fluorosis in the children in the fluoridated areas. A Hildebolt study in 1989 on 6,000 school children along with a 1990 study by Dr John Yiamouyiannis on 39,000 school children contradicted any alleged benefits from the use of sodium fluorides. Four major studies involving 480,000 children (US, 39,000; Japan, 22,000; India, 400,000; Tucson, 29,000) comparing fluoridated and non-fluoridated areas showed no significant difference in dental decay rates.

The International Academy of Oral Medicine and Toxicology has classified fluoride as an unapproved dental medicament due to its high toxicity.

The FDA considers fluoride an unapproved new drug for which there is no proof of safety or effectiveness.

The FDA does not consider fluoride an essential nutrient.

Chemical facts about fluoride

Fluoride is listed as an acute toxin. It has a rating higher than that of lead. According to "Clinical Toxicology of Commercial products," 5th Edition, 1984, lead is given a toxicity rating of 3 to 4, and Fluoride is rated at 4 (3 = moderately toxic, 4 = very toxic). On December 7, 1992, the new EPA Maximum Contaminant Level (MCL) for lead was set at 0.015 ppm, with a goal of 0.0ppm. The MCL for fluoride is currently set for 4.0ppm - that's over 350 times the permissible level of lead and yet fluoride is more toxic than lead!

Fluoride is a toxic waste. It is a byproduct of the nuclear and aluminum industries and cannot be dumped because it is a hazardous material and absorbs readily into the ground.

The US Public Health Service has stated that fluoride makes the bones more brittle and the dental enamel more porous.

Tom’s of Main Ingredient Fact Sheet about sodium fluoride erroneously substitutes fluorine for sodium fluoride, and then says that fluorine is in its “free elemental form” (a trace mineral) when fluorine is a gas. Sodium fluoride is ***not*** fluorine in its “free elemental form” as stated in their fact sheet, thus confusing the real issue by substituting the words fluorine for sodium fluoride. They further complicate this issue by stating that the fluorine in their product is in its “free elemental form”, when in fact, fluorine is a gas.[16]

Sodium fluoride is achieved as a solid by neutralizing waste hydrofluoric acid resulting from the production of superphosphate fertilizer. It is also generated by treating sodium hydroxide and sodium carbonate with hydrofluoric acid, followed by concentrating the resulting solutions, sometimes with the addition of alcohols to precipitate the NaF or sodium fluoride. NOT a gaseous or “trace mineral” form!

Solutions and alternatives

Boiling water does not remove the fluorides from it but reverse osmosis does. Avoid drinking tap water and cooking with tap water. You can make your own toothpaste with baking soda and a small amount of peroxide. Alternative toothpastes without fluoride added are available also. You should avoid canned fruits vegetables, and instead use fresh and frozen organic fruit and vegetables.

I advise you to educate yourself by researching the references in this article and others. There are many reliable resources online that lead to legitimate research information.

Finally, become pro-active in your government by writing your congressman about your concerns. Spread the word about the findings you discover.

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4: L.I. et al, "Renal Failure and Fluorosis", Fluorine & Dental Health, JAMA 222:783 - 785, 1972
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8: S.K. Jain and A. K. Susheela, "Effect of Sodiu.,m Fluoride on Antibody Formation in Rabbits," Environmental Research, Vol. 44, pp. 117-125 (1987)
9: J.K. Mauer, et al., "Two-Year Carcinogenicity Study Of Sodium Fluoride In Rats," Journal of the National Cancer Institute, Vol. 82, pp. 1118-1126 (1990); Proctor and Gamble "Carcinogenicity Studies with Sodium Fluoride in Rats" National Institute of Environmental Health Sciences Presentation, July 27, 1985; S. E. Hrudley et al., "Drinking Water Fluoridation and Osteosarcoma," Canadian Journal of Public Health, Vol. 81, pp. 415-416 (1990); P. D. Cohn, "A Brief Report on the Association of Drinking Water Fluoridation and Incidence of Osteosarcoma in Young Males," New Jersey Department of Health, Trenton, New Jersey, Nov. 1992; M. C. Mahoney et al., "Bone Cancer Incidence Rates in New York," American Journal of Public Health, Vol. 81, pp. 81, 475 (1991); Irwin Herskowitz and Isabel Norton, "Increased Incidence of Melanotic Tumors Following Treatment with Sodium Fluoride," Genetics Vol. 48, pp. 307-310 (1963); J. A. Disney, et al., " A Case Study in Testing the Conventional Wisdom: School Based Fluoride Mouth Rinse Programs in the USA," Community Dentistry and Oral Epidemiology, Vol. 18, pp.

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13: FRENI SC (1994) Exposure to high fluoride concentrations in drinking water associated with decreased birth rates *J Toxicology & Environmental Health* **42** 109-121

14: "WHY I CHANGED MY MIND ABOUT WATER FLUORIDATION" Dr. John Colquhoun © 1997 University of Chicago Press; http://www.nofluoride.com/changed_my_mind.htm

15: Subject: [DS-N] OFF TOPIC - NON-DS Re: Fluoridation Increases Lead Absorption in Children Date: Wed, 20 Oct 1999 08:12:25 EDT OLD BETHPAGE, N.Y., Oct. 20 /PRNewswire/17th International Neurotoxicology Conference ("Children's Health and the Environment," Little Rock, Arkansas, October 17-20, 1999).

16: http://www.tomsofmaine.com/Toms/ifs/fluoride.asp

MSDS Sheet **Prepared by:** Environmental Health & Safety
Phone Number: (314) 654-1600 (U.S.A.)

SODIUM FLUORIDE

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1. Product Identification

Synonyms: Floridine; sodium monofluoride; disodium difluoride; natrium fluoride; Florocid
CAS No.: 7681-49-4
Molecular Weight: 41.99
Chemical Formula: NaF
Product Codes:
J.T. Baker: 3687, 3688, 3689
Mallinckrodt: 0467, 5309, 5325, 7636

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2. Composition/Information on Ingredients

Ingredient	CAS No	Percent Hazardous
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Sodium Fluoride	7681-49-4	100%	Yes

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3. Hazards Identification

Emergency Overview

DANGER! MAY BE FATAL IF SWALLOWED OR INHALED. AFFECTS RESPIRATORY SYSTEM, HEART, SKELETON, CIRCULATORY SYSTEM, CENTRAL NERVOUS SYSTEM AND KIDNEYS. CAUSES IRRITATION TO SKIN, EYES AND RESPIRATORY TRACT. IRRITATION EFFECTS MAY BE DELAYED.

SAF-T-DATA(tm) Ratings (Provided here for your convenience)

Health Rating: 3 - Severe (Poison)
Flammability Rating: 0 - None
Reactivity Rating: 1 - Slight
Contact Rating: 3 - Severe
Lab Protective Equip: GOGGLES & SHIELD; LAB COAT & APRON; VENT HOOD; PROPER GLOVES
Storage Color Code: Blue (Health)

Potential Health Effects

If inhaled or swallowed, this compound can cause fluoride poisoning. Early symptoms include nausea, vomiting, diarrhea, and weakness. Later effects include central nervous system effects, cardiovascular effects and death.

Inhalation:
Causes severe irritation to the respiratory tract, symptoms may include coughing, sore throat, and labored breathing. May be absorbed through inhalation of dust; symptoms may parallel those from ingestion exposure. Irritation effects may not appear immediately.

Ingestion:
Toxic! May cause salivation, nausea, vomiting, diarrhea, and abdominal pain. Symptoms of weakness, tremors, shallow respiration, cardopedal spasm, convulsions, and coma may follow. May cause brain and kidney damage. Affects heart and circulatory system. Death may occur from respiratory paralysis. Estimated lethal dose = 5-l0 grams.

Skin Contact:
Causes irritation, with redness and pain. Solutions are corrosive. Effects may not appear immediately.

Eye Contact:
Eye irritant! May cause irritation and serious eye damage. Effects may not immediately appear.

Chronic Exposure:
Chronic exposure may cause mottling of teeth and bone damage (osteosclerosis) and fluorosis. Symptoms of fluorisis include brittle bones,weight loss, anemia, calcified ligaments, general ill health and joint stiffness.

Aggravation of Pre-existing Conditions:
Populations that appear to be at increased risk from the effects of fluoride are individuals that suffer from diabetes insipidus or some forms of renal impairment.

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4. First Aid Measures

First aid procedures should be pre-planned for fluoride compound emergencies.

Inhalation:
If inhaled, remove to fresh air. If not breathing, give artificial respiration. If breathing is difficult, give oxygen. CALL A PHYSICIAN IMMEDIATELY.

Ingestion:
Administer milk, chewable calcium carbonate tablets or milk of magnesia. Never give anything by mouth to an unconscious person. CALL A PHYSICIAN IMMEDIATELY.
Skin Contact:
Wipe off any excess material from skin and then immediately flush skin with large amounts of soapy water. Remove contaminated clothing and shoes. Wash clothing before re-use. Apply bandages soaked in magnesium sulfate. CALL A PHYSICIAN IMMEDIATELY.
Eye Contact:
Immediately flush eyes with gentle but large stream of water for at least 15 minutes, lifting lower and upper eyelids occasionally. Call a physician immediately.

Note to Physician:
For large exposures, systemic effects (hypocalcemia and hypomagnesia) may occur.

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5. Fire Fighting Measures

Fire:
Not considered to be a fire hazard.
Explosion:
Not considered to be an explosion hazard.
Fire Extinguishing Media:
Use any means suitable for extinguishing surrounding fire.
Special Information:
In the event of a fire, wear full protective clothing and NIOSH-approved self-contained breathing apparatus with full facepiece operated in the pressure demand or other positive pressure mode.

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6. Accidental Release Measures

Ventilate area of leak or spill. Wear appropriate personal protective equipment as specified in Section 8. Spills: Pick up and place in a suitable container for reclamation or disposal, using a method that does not generate dust. US Regulations (CERCLA) require reporting spills and releases to soil, water and air in excess of reportable quantities. The toll free number for the US Coast Guard National Response Center is (800) 424-8802.

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7. Handling and Storage

Keep in a tightly closed container, stored in a cool, dry, ventilated area. Protect against physical damage. Separate from acids and oxidizing materials. Containers of this material may be hazardous when empty since they retain product residues (dust, solids); observe all warnings and precautions listed for the product.

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8. Exposure Controls/Personal Protection

Airborne Exposure Limits:
-OSHA Permissible Exposure Limit (PEL):
2.5 mg(F)/m3 (TWA)

-ACGIH Threshold Limit Value (TLV):
2.5 mg(F)/m3 (TWA)
Ventilation System:
A system of local and/or general exhaust is recommended to keep employee exposures below the Airborne Exposure Limits. Local exhaust ventilation is generally preferred because it can control the emissions of the contaminant at its source, preventing dispersion of it into the general work area. Please refer to the ACGIH document, *Industrial Ventilation, A Manual of Recommended Practices*, most recent edition, for details.
Personal Respirators (NIOSH Approved):

If the exposure limit is exceeded and engineering controls are not feasible, a half facepiece particulate respirator (NIOSH type N95 or better filters) may be worn for up to ten times the exposure limit or the maximum use concentration specified by the appropriate regulatory agency or respirator supplier, whichever is lowest.. A full-face piece particulate respirator (NIOSH type N100 filters) may be worn up to 50 times the exposure limit, or the maximum use concentration specified by the appropriate regulatory agency, or respirator supplier, whichever is lowest. If oil particles (e.g. lubricants, cutting fluids, glycerine, etc.) are present, use a NIOSH type R or P filter. For emergencies or instances where the exposure levels are not known, use a full-facepiece positive-pressure, air-supplied respirator. WARNING: Air-purifying respirators do not protect workers in oxygen-deficient atmospheres.

Skin Protection:

Wear impervious protective clothing, including boots, gloves, lab coat, apron or coveralls, as appropriate, to prevent skin contact.

Eye Protection:

Use chemical safety goggles and/or full face shield where dusting or splashing of solutions is possible. Maintain eye wash fountain and quick-drench facilities in work area.

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9. Physical and Chemical Properties

Appearance:

White crystals.

Odor:

Odorless.

Solubility:

4 g/100 ml water @ 15C (59F)

Specific Gravity:

2.78

pH:

No information found.

% Volatiles by volume @ 21C (70F):

0

Boiling Point:

1700C (3092F)

Melting Point:

993C (1819F)

Vapor Density (Air=1):

No information found.

Vapor Pressure (mm Hg):

1 @ 1077C (1971F)

Evaporation Rate (BuAc=1):

No information found.

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10. Stability and Reactivity

Stability:

Stable under ordinary conditions of use and storage.

Hazardous Decomposition Products:

Burning may produce hydrogen fluoride vapors.

Hazardous Polymerization:

Will not occur.

Incompatibilities:

Reacts with acids to form hydrogen fluoride.

Conditions to Avoid:

No information found.

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11. Toxicological Information

Oral rat LD50: 52 mg/kg; Eye Rabbit (standard Draize) 20mg/24-hr, moderate; Investigated as a tumorigen, mutagen, reproductive effector

--------\Cancer Lists\----------

Ingredient	---NTP Carcinogen--- Known	Anticipated	IARC Category
Sodium Fluoride (7681-49-4)	No	No	None

12. Ecological Information

Environmental Fate:
No information found.
Environmental Toxicity:
For Sodium Flouride:
48 hour EC50 Daphnia magna (water flea) : 338 mg/L.
96 hour LC50 Lepomis macrochirus (bluegill) : > 530 mg/L.
96 hour EC50 Selenastrum capricornutum (green algea) : 272 mg/L.

LD50, oral (goat, sheep) 100 mg/kg; LD50, oral (wild bird) 110 mg/kg.

This material is not expected to be toxic to aquatic life.

13. Disposal Considerations

Whatever cannot be saved for recovery or recycling should be managed in an appropriate and approved waste disposal facility. Processing, use or contamination of this product may change the waste management options. State and local disposal regulations may differ from federal disposal regulations. Dispose of container and unused contents in accordance with federal, state and local requirements.

14. Transport Information

Domestic (Land, D.O.T.)

Proper Shipping Name: SODIUM FLUORIDE
Hazard Class: 6.1
UN/NA: UN1690
Packing Group: III
Information reported for product/size: 250LB

International (Water, I.M.O.)

Proper Shipping Name: SODIUM FLUORIDE, SOLID
Hazard Class: 6.1
UN/NA: UN1690
Packing Group: III
Information reported for product/size: 250LB

International (Air, I.C.A.O.)

Proper Shipping Name: SODIUM FLUORIDE, SOLID
Hazard Class: 6.1
UN/NA: UN1690

Packing Group: III
Information reported for product/size: 250LB

15. Regulatory Information

--------\Chemical Inventory Status - Part 1\----------

Ingredient	TSCA	EC	Japan	Australia
Sodium Fluoride (7681-49-4)	Yes	Yes	Yes	Yes

--------\Chemical Inventory Status - Part 2\----------

Ingredient	Korea	--Canada-- DSL	NDSL	Phil.
Sodium Fluoride (7681-49-4)	Yes	Yes	No	Yes

--------\Federal, State & International Regulations - Part 1\----------

Ingredient	-SARA 302- RQ	TPQ	------SARA 313------ List	Chemical Catg.
Sodium Fluoride (7681-49-4)	No	No	No	No

--------\Federal, State & International Regulations - Part 2\----------

Ingredient	CERCLA	-RCRA- 261.33	-TSCA- 8(d)
Sodium Fluoride (7681-49-4)	1000	No	No

Chemical Weapons Convention: Yes TSCA 12(b): No CDTA: No
SARA 311/312: Acute: Yes Chronic: Yes Fire: No Pressure: No
Reactivity: No (Pure / Solid)

Australian Hazchem Code: 2Z
Poison Schedule: S2
WHMIS:
This MSDS has been prepared according to the hazard criteria of the Controlled Products Regulations (CPR) and the MSDS contains all of the information required by the CPR.

16. Other Information

NFPA Ratings: Health: **3** Flammability: **0** Reactivity: **0**
Label Hazard Warning:
DANGER! MAY BE FATAL IF SWALLOWED OR INHALED. AFFECTS RESPIRATORY SYSTEM, HEART, SKELETON, CIRCULATORY SYSTEM, CENTRAL NERVOUS SYSTEM AND KIDNEYS.

CAUSES IRRITATION TO SKIN, EYES AND RESPIRATORY TRACT. IRRITATION EFFECTS MAY BE DELAYED.

Label Precautions:

Do not breathe dust.
Keep container closed.
Use only with adequate ventilation.
Wash thoroughly after handling.
Avoid contact with eyes, skin and clothing.

Label First Aid:

In all cases call a physician immediately. First Aid procedures should be pre-planned for fluoride compound emergencies. If swallowed, administer milk, chewable calcium carbonate tablets or milk of magnesia. Never give anything by mouth to an unconscious person. If inhaled, remove to fresh air. If not breathing, give artificial respiration. If breathing difficult, give artificial respiration. In case of skin contact wipe off any excess material then immediately flush skin with large amounts of soapy water. Remove contaminated clothing and shoes. Wash clothing before re-use. Apply bandages soaked in magnesium sulfate. In case of eye contact, immediately flush eyes with gentle but large stream of water for at least 15 minutes, lifting upper and lower eyelids occasionally.

Product Use:

Laboratory Reagent.

Revision Information:

MSDS Section(s) changed since last revision of document include: 12.

Disclaimer:

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